

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: IMPROVED PRINTING MACHINES
Attorney Docket Number:: 0502-1024
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 2
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: PIERRE
Middle Name::
Family Name:: SIMON
Name Suffix::
City of Residence:: ORLEANS
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 42, RUE ALEXANDRE DUMAS
Address::
City of Mailing Address:: ORLEANS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-45100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERNARD
Middle Name::
Family Name:: SIX
Name Suffix::
City of Residence:: OLIVET
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 144, RUE DES VANNEAUX
Address::
City of Mailing Address:: OLIVET

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-45160

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/02427	7/31/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02.09879	8/2/02	Yes

Assignment Information

Assignee Name:: KOMORI-CHAMBON SA
Street of Mailing 6, RUE AUGUSTE RODIN
Address::
City of Mailing Address:: ORLEANS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-45060